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PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

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**DECLARATION
AND
POWER OF ATTORNEY
FOR UTILITY OR DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☐ Declaration Submitted with Initial Filing **OR** ☒ Declaration Submitted after Initial Filing (Surcharge (37 CFR 1.16(e)) required)

Attorney Docket Number VTN-570

First Named Inventor David Turner et al.

COMPLETE IF KNOWN

Application Number 10/029,526

Filing Date December 21, 2001

Group Art Unit 2873

Examiner Name

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

ANTIMICROBIAL LENSES AND METHODS OF THEIR USE
(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 12/21/2001 as United States Application Number 10/029,526 and was amended on (MM/DD/YYYY) ☐

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.


I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

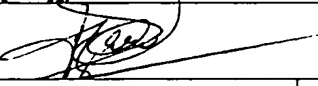
☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

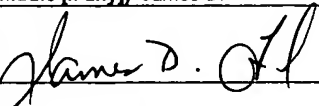
DECLARATION - Utility or Design Patent Application		
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.		
Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/309,642	08/02/2001	
I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:		
Application Serial No.	Filing Date	Status
		Patented Patented Patented
I hereby appoint: <div style="float: right; text-align: right;"> Place Customer Number Bar Code Label Here </div> <div style="clear: both;"></div> <div style="margin-top: 10px;"> <input checked="" type="checkbox"/> Practitioners at Customer Number 000027777 → </div> <div style="margin-top: 10px;"> AND </div> <div style="margin-top: 10px;"> <input type="checkbox"/> Practitioner(s) named below: <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <u>Name</u> <u>Registration Number</u> </div> </div>		
as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.		
Address all telephone calls to Ruby T. Hope at telephone number (732) 524-1024.		
Direct all correspondence to: <div style="display: flex; align-items: center; margin-left: 10px;"> <input checked="" type="checkbox"/> Customer Number or Bar Code Label <div style="border: 1px solid black; padding: 0 10px; margin: 0 5px;">000027777</div> OR <div style="margin-left: 20px;"> <input type="checkbox"/> Correspondence address below </div> </div>		
Name:		
Address:		
Address:		
City:	State:	ZIP
Country	Telephone:	Fax:

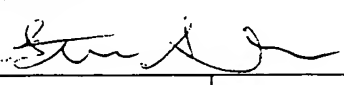
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

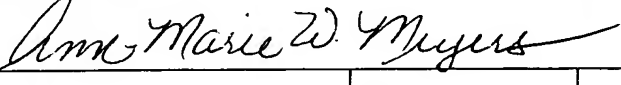
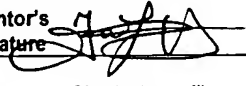
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) David C.		Family Name or Surname Turner	
Inventor's Signature 		Date 7/19/02	
Residence: City Jacksonville	State FL	Country 32223	Citizenship USA
Mailing Address 12159 Travertine Trail			
City Jacksonville	State FL	ZIP 32223	Country US
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Azaam		Family Name or Surname Alli	
Inventor's Signature 		Date 7/18/02	
Residence: City Jacksonville	State FL	Country USA	Citizenship Guyana
Mailing Address 7816 Southside Blvd. #221			
City Jacksonville	State FL	ZIP 32256	Country USA
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			

NAME OF THIRD INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) James D.		Family Name or Surname Ford	
Inventor's Signature 		Date 07/22/02	
Residence: City Orange Park	State FL	Country USA	Citizenship USA
Mailing Address 515 Nassau Ct.			
City Orange Park	State FL	ZIP 32003-8063	Country USA

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF FOURTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Stephen L.		Family Name or Surname Galas	
Inventor's Signature 		Date 7/19/02	
Residence: City Jacksonville	State FL	Country USA	Citizenship USA
Mailing Address 4617 Cape Elizabeth Court E			
City Jacksonville	State FL	ZIP 32277	Country USA

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF FIFTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Ann-Marie W. ^{AWM 7/19/02}		Family Name or Surname Meyers	
Inventor's Signature 		Date 7/19/02	
Residence: City Jacksonville	State FL	Country USA	Citizenship USA
Mailing Address 3134 Misty Creek Lane			
City Jacksonville	State FL	ZIP 32216	Country USA
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SIXTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Frank L.		Family Name or Surname Neely	
Inventor's Signature 		Date 7/22/02	
Residence: City Jacksonville	State FL	Country USA	Citizenship USA
Mailing Address ^{FN 7/22/02} 12684 Dunraven Trail 804 Lapoma Way			
City Jacksonville	State FL	ZIP ³²²⁵⁹ 32216 ^{FN 7/24/02}	Country USA

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true ; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SEVENTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) James R.		Family Name or Surname Petisce	
Inventor's Signature <i>James R. Petisce</i>		Date 7/19/2002	
Residence: City Jacksonville	State FL	Country USA	Citizenship USA
Mailing Address 10228 E. Vineyard Lake Rd.			
City Jacksonville	State FL	ZIP 32256	Country USA

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF EIGHTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Robert B.		Family Name or Surname Steffen	
Inventor's Signature <i>[Signature]</i>		Date 7/19/02	
Residence: City Jacksonville Beach	State FL	Country USA	Citizenship USA
Mailing Address 1158 Blue Heron Lane West			
City Jacksonville Beach	State FL	ZIP 32250	Country USA
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF NINTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Douglas G. <i>DN 7-19-02</i>		Family Name or Surname Vanderlaan	
Inventor's Signature <i>Douglas Vanderlaan</i>		Date 7-19-02	
Residence: City Jacksonville	State FL	Country USA	Citizenship USA
Mailing Address 8114 Parkridge Cir. S.			
City Jacksonville	State FL	ZIP 32211	Country USA

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF TENTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) James

Family Name
or Surname Jen

Inventor's
Signature

James Jen

Date

7-19-2002

Residence: City Jacksonville

State FL

Country USA

Citizenship USA

Mailing Address 10052 Deercreek Club Road

City Jacksonville

State FL

ZIP 32256

Country USA

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF ELEVENTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Joseph R.

Family Name
or Surname Hepting

Inventor's
Signature

Joseph R. Hepting

Date

7-19-2002

Residence: City Jacksonville

State FL

Country USA

Citizenship USA

Mailing Address 4263 Losco Road, #726

City Jacksonville

State FL

ZIP 32257

Country USA

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF TWELVETH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) James

Family Name
or Surname Ebel

Inventor's
Signature

Date

Residence: City Glendale

State CA

Country USA

Citizenship USA

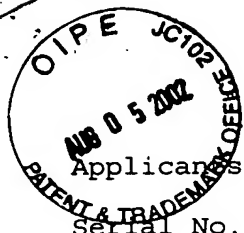
Mailing Address 3571 Emanuel Drive

City Glendale

State CA

ZIP 91208

Country USA



DOCKET NO. VTN-570

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: David Turner et al.

Serial No.: 10/029,526

Art Unit: 2873

Filed : December 21, 2001

Examiner:

For : ANTIMICROBIAL LENSES AND METHODS OF THEIR USE

COPY OF PAPERS
ORIGINALLY FILED

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Box Missing Parts, Commissioner for Patents, Washington, DC 20231 on

July 29, 2002

(Date of Deposit)

Ruby T. Hope

(Name of applicant, assignee, or Registered Representative)

(Signature)

July 29, 2002

(Date of Signature)

BOX MISSING PARTS
Commissioner for Patents
Washington, D.C. 20231


SUBMISSION OF COMBINED DECLARATION AND POWER OF ATTORNEY

Dear Sir:

Pursuant to Rule 53(f) and Rule 54, please find enclosed a Combined Declaration and Power of Attorney for the application of David Turner et al. entitled ANTIMICROBIAL LENSES AND METHODS OF THEIR USE attorney Docket No. VTN-570, to complete, pursuant to Rule 51, this application filed on December 21, 2001 by Express Mail pursuant to Rule 10. As required, a copy of the Notice to File Missing Parts of Application and a Petition for 4 months Extension of Time is also attached.

Please charge Johnson & Johnson Deposit Account No. 10-0750/VTN570/RTH in the amounts of \$130.00 for submission of the Declaration pursuant to Section 1.16(e). The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Account No. 10-0750/VTN570/RTH. This sheet is submitted in triplicate.

Respectfully submitted,


Ruby T. Hope
Reg. No. 34,350
Attorney for Applicant(s)

Johnson & Johnson
One Johnson & Johnson Plaza
New Brunswick, NJ 08933-7003
(732) 524-1024